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ONE HUNDRED FOURTEENTH CONGRESS
Congress of the United States
House of Representatives
COMMITTEE ON ENERGY AND COMMERCE
2125 RAYBURN HOUSE OFFICE BUILDING
WASHINGTON, DC 20515-6115
Majority (202) 225-2927
Minority (202) 225-3641

February 27, 2015

Dr. Barbara McAneny
Chair, AMA Board of Trustees
CEO, New Mexico Oncology Hematology Consultants, Ltd.
25 Massachusetts Avenue, N.W.
Washington, D.C. 20001-7400

Dear Dr. McAneny:

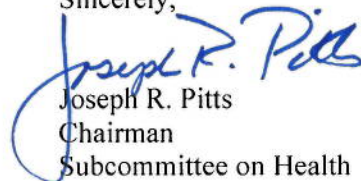
Thank you for appearing before the Subcommittee on Health on Thursday, January 22, 2015, to testify at the hearing entitled "A Permanent Solution to the SGR: The Time is Now."

Pursuant to the Rules of the Committee on Energy and Commerce, the hearing record remains open for ten business days to permit Members to submit additional questions for the record, which are attached. The format of your responses to these questions should be as follows: (1) the name of the Member whose question you are addressing, (2) the complete text of the question you are addressing in bold, and (3) your answer to that question in plain text.

To facilitate the printing of the hearing record, please respond to these questions with a transmittal letter by the close of business on Friday, March 13, 2015. Your responses should be mailed to Adrianna Simonelli, Legislative Clerk, Committee on Energy and Commerce, 2125 Rayburn House Office Building, Washington, D.C. 20515 and e-mailed in Word format to Adrianna.Simonelli@mail.house.gov.

Thank you again for your time and effort preparing and delivering testimony before the Subcommittee.

Sincerely,



Joseph R. Pitts
Chairman
Subcommittee on Health

cc: Gene Green, Ranking Member, Subcommittee on Health

Attachment

Attachment—Additional Questions for the Record

The Honorable Joseph R. Pitts

1. The President's FY2015 budget to Congress included a proposal that "would introduce a Part B premium surcharge for new beneficiaries who purchase Medigap policies with particularly low cost-sharing requirements, starting in 2018. Other Medigap plans that meet minimum cost-sharing requirements would be exempt from the requirement. The surcharge would be equivalent to approximately 15 percent of the average Medigap premium (or about 30 percent of the Part B premium)." What is your organization's position on this policy?
2. Senator Lieberman, during the hearing the day prior to your testimony, said there is "nothing historically radical" about offsetting the SGR fix. He testified that "SGR reform will not make it into reality without an offset." Your organization has lobbied Congress for over a decade on the need to repeal SGR without offsets. Clearly, this approach has been unsuccessful. Is your organization ready to acknowledge that the best pathway for success through the House for SGR reform is a bill that includes offsets?
3. Other provider organizations have presented this Committee with offsets to consider for SGR. I noticed that your testimony does not include offsets. Is the AMA willing to help us out – on your organization's number one legislative priority – by suggesting bipartisan offsets that we might consider?
4. As you know, for us to be successful in getting SGR reform passed into law, we need willing partners in the Senate – and at the other end of Pennsylvania Avenue at the White House. Please outline in detail what your organization has been doing since January 1, 2015 to support a permanent SGR fix with bipartisan offsets, including actions such as:
 - Publicly endorsing specific, concrete bipartisan offsets
 - Meeting with White House officials on the need to repeal SGR this year and pay for it with bipartisan offsets
 - Meeting with House Democrats on the need to repeal SGR this year and pay for it with bipartisan offsets
 - Meeting with Senate on the need to repeal SGR this year and pay for it with bipartisan offsets
 - Meeting with Senate Democratic leadership on the need to repeal SGR this year and pay for it with bipartisan offsets
 - Designing or implementing public advocacy efforts to inform consumers and seniors of on the need to repeal SGR this year and pay for it with bipartisan offsets

The Honorable Eliot Engel

I have been hearing from the physician community in New York for years about their growing frustration at the constant threat of significant reimbursement cuts. They frequently mention that the cost of running their practice is increasing each year and they are trying to properly treat patients with increasingly complicated medical conditions; all the while, facing double digit reimbursement cuts. It just isn't right.

- a. Can you elaborate on why it is urgent for physicians and patient access to care that Congress reform the Medicare reimbursement system now and how another patch would be detrimental to our Medicare program?

The Honorable Ben Ray Lujan

1. The current Sustainable Growth Rate (SGR) Medicare payment system is unsustainable and needs to be fixed. In New Mexico, I continue to hear from providers and seniors about their frustration with SGR and the uncertainty that it creates. We cannot continue to patch this broken system, and we've been talking about a permanent fix for years. We need to deal with this now, and I support the bipartisan/bicameral SGR structural reform that was crafted last Congress that is supported by both provider and beneficiary groups.
 - a. In New Mexico there is a shortage of primary care physicians. Can you speak to how delivery system reform is connected to SGR repeal? How do you see the move away from fee for service impacting doctors' participation in Medicare?
 - b. Given all we know about the impact of primary care on quality, patient satisfaction, and costs, what more do you believe we should do to promote and support our primary care physicians?